



## HAWAII STATE ETHICS COMMISSION

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### GIFTS DISCLOSURE STATEMENT

*(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)*

NAME:

STATE POSITION:

STATE AGENCY:

STATE TEL. NO.:

STATE MAILING ADDRESS:

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE

\_\_\_\_ Check here if you have attached additional sheets.  
*CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.*

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_